

PATENT APPLICATION SERIAL NO.

10/530487

Rec'd PCT/PTO 06 APR 2005

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

04/12/2005 SNAJARRO 00000043 10530487

01 FC:1631	300.00 OP
<del>02 FC:1632</del>	<del>500.00 OP</del>
03 FC:1633	200.00 OP
04 FC:1615	650.00 OP

08/31/2005 BCAMPBEL 00000010 10530487

01 FC:1642 400.00 OP

Adjustment date: 08/31/2005 BCAMPBEL  
04/12/2005 SNAJARRO 00000043 10530487  
02 FC:1632 -500.00 OP

PTO-1556  
(5/87)

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8/30/05</u>		2 Serial/Patent # <u>10/530487</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ <u>100.00</u>							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">6</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">9</td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">6</td></tr></table>			0	6	--	0	9	1	6
0	6	--	0	9	1	6					
10 REASON:											
	Overpayment										
	Duplicate Payment										
	No Fee Due (Explanation):										
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME:		TITLE:									
SIGNATURE:		PHONE:									
OFFICE:											
THIS SPACE RESERVED FOR FINANCE USE ONLY:		<div style="font-size: small;"> Repln. Ref: 08/31/2005 BCAMPBEL 0022051000  FC: 9204 Name/Number: 10530487  \$100.00 CR </div>									
APPROVED:		DATE:									

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*